NONPROVISIONAL PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE OLIFF & BERRIDGE, PLC Attorney Docket No.: 117186 P.O. Box 19928 Alexandria, Virginia 22320 Date: September 15, 2003 Telephone: (703) 836-6400 Facsimile: (703) 836-2787 MAIL STOP PATENT APPLICATION NONPROVISIONAL APPLICATION TRANSMITTAL Customer Number: 25944 **RULE §1.53(b)** Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir: Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application For (Title): SERVICE PROCESSING SYSTEM AND SERVICE PROCESSING METHOD Yuji HIKAWA, Yukio TAJIMA, Kazuko KIRIHARA, Akihiro ENOMOTO, Hidekazu By (Inventors): Formal drawings (Figs. 1-13, 13 Sheets) are attached. \boxtimes _ for front page of Publication. Use Figure ___ A Declaration and Power of Attorney is filed herewith. This application claims benefit of Provisional Application No. filed. (A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.) \boxtimes This patent application is assigned to FUJI XEROX CO., LTD. The executed Assignment is filed herewith. An Information Disclosure Statement is filed herewith. Entitlement to small entity status is hereby asserted. A Preliminary Amendment is filed herewith. Priority of foreign application(s) No. 2003-081453 filed March 24, 2003 in Japan is claimed (35 U.S.C. §119). A certified copy of the above corresponding foreign application(s) is filed herewith. This application is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing. 冈 The filing fee is calculated below: CLAIMS IN THE APPLICATION AFTER ENTRY OF

ANY PRELIMINARY AMENDMENT NOTED ABOVE

FOR:	NO. FILED	NO. EXTRA
1010	NO. TIEED	NO. EXTIGN
BASIC FEE		
TOTAL CLAIMS	17 - 20	= *0
INDEP CLAIMS	5 - 3	= *2
☐ MULTIPLE DEPENDENT CLAIMS PRESENTED		

* If the difference is less than zero, enter "0".

SMALL ENTITY RATE FEE <u>OR</u> \$ 375 <u>OR</u> 9 = \$ OR х 42 = \$ x <u>or</u> + 140 = \$ <u>OR</u> TOTAL OR

OTHER THAN A **SMALL ENTITY**

FEE	
\$ 750	
\$	
\$ 168	
\$	
\$ 918	

 \boxtimes Check No. 146288 in the amount of \$918 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

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